2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 26, 2005 08:00 AM Secretary of State **DOCUMENT # P02000085478** 1. Entity Name **B&SCONTRACTING, INC.** Principal Place of Business Mailing Address 2474 TANDORI CIRCLE 2474 TANDORI CIRCLE ORLANDO, FL 32837 ORLANDO, FL 32837 04202005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 55-0793213 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE FREIER, BRYAN 2474 TANDOR! CIRCLE ORLANDO, FL 32837 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of recistered again and title if applicable (NOTE: Registered Agent signature regularity when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME FREIER, BRYAN STREET ADDRESS 2474 TANDORI CIR ORLANDO, FL 32837 CITY-ST-ZIP 000000333331 TITLE **U4726/05-80094-017 150.00** FREIER, SANDRA C NAME STREET ADDRESS 2474 TANDORI CIR CITY-ST-ZIP ORLANDO, FL 32837 TITLE NAME STREET ADDRESS DO NOT WRITE CMY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CUTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED